## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10814778

|   |  | CLAIMS AS                                 | (Column 2)     |                               |                              | SMALL ENTITY TYPE |             | OR                  | OTHER THA              |    |                     |                        |
|---|--|---|----------------|-------------------------------|------------------------------|-------------------|-------------|---------------------|------------------------|----|---------------------|------------------------|
| TOTAL CLAIMS 6  |  |   |                | 911                           |                              |                   |             | RATE                | FEE                    |    | RATE                | FEE                    |
| FOR NUMBER FILED  |  |   |                |                               | NUMBER EXTRA                 |                   |             | BASIC FEE           | 385.00                 | OR | BASIC FEE           | 770.00                 |
| TOTAL CHARGEABLE CLAIMS 2 3minus 20   |  |   |                | us 20=                        | • 3                          |                   |             | X\$ 9=              |                        | OR | X\$18=              |                        |
| INDEPENDENT CLAIMS / minus 3 =  |  |   |                |                               |                              |                   |             | X43=                |                        | OR | X86=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                |                               |                              | A                 |             | +145=               |                        | OR | +290=               |                        |
| * If the difference in column 1 is less than zero, enter  |  |   |                |                               |                              | olumn 2           |             | TOTAL               |                        | OR | TOTAL               | -                      |
| CLAIMS AS AMENDED - PART II   |  |   |                |                               |                              |                   |             |                     |                        |    | OTHER               | THAN                   |
| (Column 1)  |  |   |                |                               | Column 2) (Column 3)         |                   |             | SMALL E             | NTITY                  | OR | SMALL               | YTITM                  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY                 | PRESENT<br>EXTRA  |             | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus          | ##                            |                              | =                 |             | X\$ 9=              |                        | OR | X\$18=              |                        |
|   | Independent                                    | *   | Minus          | ***                           |                              | =                 |             | X43=                |                        | OR | X86=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                               |                              |                   |             | +145=               |                        | OR | +290=               |                        |
|   |  |   |                |                               |                              |                   |             | TOTAL               |                        | OR | TOTAL               | ·                      |
|   | (Column 1) (Column 2) (Column 3)               |   |                |                               |                              |                   |             | ADDIT. FEE          |                        |    | ADDIT. FEE          |                        |
| TB  |  | CLAIMS<br>REMAINING<br>AFTER              |                | HIGH<br>NUM                   | IEST<br>IBER<br>OUSLY        | PRESENT<br>EXTRA  |             | RATE                | ADDI-<br>TIONAL        |    | RATE                | ADDI-<br>TIONAL        |
| MENDMENT  |  | AMENDMENT                                 | <u> </u>       | PAID                          | FOR                          | <u> </u>          | 1           |                     | FEE                    |    | <b> </b>            | FEE                    |
| Q   | Total  | *   | Minus          | ** .                          |                              | =                 |             | X\$ 9≃              |                        | OR | X\$18=              |                        |
| AME   | Independent                                    | *   | Minus          | ***                           |                              | ]=                |             | X43=                |                        | OR | X86=                |                        |
| L_  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                               |                              |                   | J           | +145=               |                        | OR | +290=               |                        |
|   |  |   |                |                               |                              |                   |             | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT, FEE |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |                |                               |                              |                   |             |                     |                        | -  | NOO!!! I EE         |                        |
| AMENDMENT C   | `  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGI<br>NUN<br>PREV           | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA  |             | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | * .                                       | Minus .        | **                            |                              | =                 |             | X\$ 9=              |                        | OR | X\$18=              |                        |
| ME  | Independent                                    | *   | Minus ***      |                               |                              | =                 |             | X43=                |                        | OR | X86=                |                        |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                               |                              |                   |             |                     |                        |    | -                   |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |                |                               |                              |                   |             |                     |                        | OR | +290=               |                        |
| **  | If the "Highest Nu                             | mber Previously P                         | aid For" IN TH | S SPACE                       | is less tha                  | an 20, enter "20  | ). <b>"</b> | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                |                               |                              |                   |             |                     |                        |    |                     |                        |